## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

Establishment Name					Tolonhono Number	D 4 6 ID#		
GRAB N GO		ANY			Telephone Number  Est 812-913-4114	Date of Inspection	ID#	
Address 2750 CHARLESTOWN RD, NEW ALBANY IN 47150					Own 610-505-0633	07/29/2020		
Owner					Purpose	Follow Up	Released	
PRAKASHKUMAR PATEL					X Routine	08/05/2020	07/29/2020	
Owner's Address 2002 VINCENNES PLACE FLOYDS KNOBS, IN 47119					Follow-up Complaint		,	
Person in Charge SUNNY PATEL					Pre-Operational			
Responsible P	erson's En	nail			Temporary HACCP	Menu Type  1 2 3 _X	<u> </u>	
Certified Food Handler PRAKASHKUMAR PATEL					Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section #	C	NC	R Narrative		То Ве С	To Be Corrected		
116		X		coverings being improperly gengaged. Staff installed infrontation.	CORRE	CTED		
177	X		Observed cases	Observed cases of raw chicken stored too close/touching flats of bottled beverages.				
345	Х		-	utensil being left in hands	g CORRECTED			
415	Х		•	near prep handwashing sin	k and gnats under lobby drink	1 WEEK		
177	Χ		Observed drink	flats left on walk-in coole			CORRECTED	
245		X	_	outside of sanitizer solutio		CORRECTED		
392		X		ster to be left open.	CORRECTED CORRECTED			
431		X	cleaned up.	nside lobby cabinets (from	n previous drilling) needing	CORRE	CIED	
Summary of V	violations	C	4 NC	4 R 0				
Received by (r	name and ti	tle prin	ted):		Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (signature):					Inspected by (signature):			
cc:					cc:			